



August 30, 2007  
Project 04516-2

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DEP  
NORTHEAST REGIONAL OFFICE

LOCAL  
HISTORY  
354,  
353  
GEI

Geotechnical  
Environmental and  
Water Resources  
Engineering

Ms. Irene M. Dale  
Environmental Engineer  
Bureau of Waste Site Cleanup  
Department of Environmental Protection  
205B Lowell Street  
Wilmington, MA 01887

Dear Ms. Dale:

**Re: Monthly Remedial Monitoring Report No. 3**  
**50 Tufts Street Site**  
**Somerville, MA**  
**RTN 3-26114**

On behalf of UniFirst Corporation (UniFirst) of Wilmington, Massachusetts, GEI Consultants, Inc. is submitting this Remedial Monitoring Report (RMR) No. 3 for the operation of Active Remedial Systems related to the release of chlorinated volatile organic compounds (VOCs) at 50 Tufts Street in Somerville, Massachusetts (Site), Figure 1. The Site was assigned Release Tracking Number (RTN) 3-26114 by the Massachusetts Department of Environmental Protection (DEP). A sub-slab depressurization system (SSDS) was installed and began operating at the Michael E. Capuano Early Childhood Center (Center) located at 150 Glen Street in Somerville, Massachusetts (see Figure 2) on February 1, 2007 in order to mitigate chlorinated VOCs detected in indoor air at the Center. Residential SSDSs were installed in May 2007 at 23 Tufts Street, 95 Franklin Street and 95R Franklin Street, and on June 12, 2007 at 31-33 Knowlton Street (see Figure 2).

RMR No. 3 covers the monitoring period from June 1 to June 30, 2007. This RMR was prepared to meet the requirements of the Massachusetts Contingency Plan (MCP) (310 CMR 40.0000). An Immediate Response Action (IRA) Transmittal Form (BWSC105) is attached and a copy is included in Attachment A, along with the Interim RMR Checklist.

**1 OPERATING STATUS OF ACTIVE REMEDIAL SYSTEM [310 CMR 40.0027(2)(a)]**

RMR No. 3 covers the monitoring period from June 1 to June 30, 2007. Two Active Remedial Systems are associated with this RTN including the Center SSDS and the residential SSDSs.

The Center SSDS was designed by GEI and installed by the T. Ford Company of Georgetown, Massachusetts at the Center. The system consists of pipes connected to a blower to draw vapors from beneath the building and discharge them through an exhaust pipe above the roof. All of the piping except the exhaust pipe is underground. The slotted pipes were installed beneath six classrooms along the southern side of the Center (Rooms 122, 126, 134, 138, 142 and 146). The blower is currently located in a small temporary enclosure on the southern side of the instruction wing and will be operated until the mechanical equipment can be moved to another suitable

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GEI



permanent location. Sub-slab soil gas monitoring points were installed inside the building at six locations to monitor the effectiveness of the SSDS. The six monitoring points were installed in the bathrooms of Classrooms 122, 126, 133, 137, 142 and 146. Figure 3 is the Capuano Center site plan.

The residential SSDSs were designed by GEI and installed by Storch Radon Services of Fall River, Massachusetts and Norfolk Environmental of Bridgewater, Massachusetts. The systems consist of pipes connected to a blower to draw vapors from beneath the building and discharge them through an exhaust pipe above the roof. The residential blowers are located on the exterior of the house to prevent draft effects.

The residential SSDSs installed before June 1, 2007 were described in previous RMRs. The 31-33 Knowlton Street SSDS is comprised of seven extraction points and one HS5000 fan with an exhaust muffler.

## **2 DATE AND NUMBER OF MONITORING EVENTS [310 CMR 40.0027(2)(b)]**

During the monitoring period, we performed weekly mechanical inspections of the Center SSDS. The residential SSDSs were monitored once after start-up to demonstrate vacuum distribution beneath the foundation floors. The dates of the monitoring events are shown in Tables 1A and 1B.

Between June 1 and 30, 2007, GEI monitored indoor air concentrations at the 95 and 95R Franklin Street residences. At the time of monitoring at 95R Franklin Street, the SSDS was not operating. Monitoring results are summarized in Table 2.

## **3 EFFLUENT CONCENTRATIONS [310 CMR 40.0027(2)(c)]**

Effluent concentrations from the Center were not monitored during this reporting period as access was not provided to GEI. Residential effluent concentrations were not monitored during this reporting period.

## **4 IDENTIFICATION OF DISCHARGES ABOVE PERMISSIBLE DISCHARGE CONCENTRATIONS [310 CMR 40.0027(2)(d)]**

The regulatory requirements for off-gas treatment for remedial air emissions are presented in DEP's Policy No. WSC-94-150, "Off-Gas Treatment of Point-Source Remedial Air Emissions." The DEP policy states that off-gas contaminant treatment is not required for SSDSs that produce a total air emission rate of volatile contaminants of less than 100 pounds per year (lbs/yr).

Before installing the Center SSDS, we estimated that the system would produce significantly less than 100 lbs/yr of VOCs and therefore did not install off-gas treatment processes. The calculated yearly discharge of chlorinated VOCs based on the highest observed soil gas concentration observed since system start-up and highest estimated flow rate of the fan is 6.1 lbs/yr.

For the residences at 23 Tufts Street, 95 Franklin Street and 31-33 Knowlton Street, the calculated yearly discharge rates of chlorinated VOCs were based on the highest observed soil gas or indoor air concentration measured at the residence, and the highest flow rate of the fan. The highest discharge rate for the residences was 52 lbs/yr (95 Franklin Street); however, this calculation likely overestimates the actual discharge rate. Effluent concentrations used in the residential calculations are in Table 3. Discharge calculations are presented in Table 4.





Based on initial (pre-system start-up) soil gas concentrations from beneath 95R Franklin Street, which are likely concentrated, the total VOC air emission rate of 100 lbs would likely be exceeded. However, since there are two extraction fans combining to withdraw approximately 250 cubic feet per minute(cfm) of air the resultant dilution due to mixing with some air drawn from inside the building will likely result in mass discharge of less than 100 lbs/yr. In addition, significant decline (up to three orders of magnitude) of sub-slab concentrations has been observed at the Center since system start-up and this trend has likely occurred at the residences. As a result the discharge concentrations from all the residences are likely diluted after initial concentrated soil gas values subside. GEI is evaluating the need for discharge monitoring at the residential systems.

Based on initial (pre-system start-up) soil gas concentrations from beneath 31-33 Knowlton Street, the total VOC air emission rate would be approximately 0.004 lbs/yr. Effluent concentrations used in the residential calculations are in Table 3. Discharge calculations are presented in Table 4.

## **5 RECOVERY RATES AND/OR VOLUMES [310 CMR 40.0027(2)(e)]**

There is no vapor, liquid or solid recovery associated with the operation of the Active Remedial Systems.

## **6 DISCHARGE VOLUMES [310 CMR 40.0027(2)(f)]**

The volume of effluent discharged is not calculated as part of the operation of these Active Remedial Systems.

## **7 DATE, LOCATION, TYPE AND VOLUME OF REMEDIAL ADDITIVES APPLICATIONS [310 CMR 40.0027(2)(g)]**

No remedial additives have been applied as part of these Active Remedial Systems.

## **8 GROUNDWATER DATA [310 CMR 40.0027(2)(h)]**

No groundwater data has been collected as part of these Active Remedial Systems.

## **9 RELATED MAPS, GRAPHS, OR DIAGRAMS [310 CMR 40.0027(2)(i)]**

Related tables, maps and inspection logs are included as attachments and referenced in this report.

## **10. LIMITATIONS**

This report was prepared for the use of UniFirst, exclusively. The conclusions presented in this report are based solely on the information reported in this document. Additional quantitative information regarding the Site that was not available to us may result in a modification of the findings above. The report has been prepared in accordance with generally accepted geohydrological practices. No warranty, expressed or implied, is made.



Please contact me at (781) 721-4012 or at [igladstone@geiconsultants.com](mailto:igladstone@geiconsultants.com) if you have any questions regarding this IRA Plan.

Very truly yours,

GEI CONSULTANTS, INC.



Ileen S. Gladstone, P.E., LSP

Vice President

WFS/ISG:drm

Attachments:

- Table 1A: Summary of Monitoring Events – Capuano Center
- Table 1B: Summary of Monitoring Events – Residences
- Table 2: Summary of Testing Results – Indoor Air Samples – Residences
- Table 3: Summary of Testing Results - Effluent Discharge Estimates
- Table 4: Summary of Estimated SSDS Discharge Rates
- Figure 1: Site Location Map
- Figure 2: 50 Tufts Street Site
- Figure 3: Capuano Center Site plan
- Attachment A: BWSC105 and Interim RMR Checklist
- Attachment B: Weekly Mechanical Inspection Logs for Capuano Center
- Attachment C: Graphs of SSDS and Sub-Slab Total VOC Concentrations

c: Stephen Aquilino, UniFirst  
Peter Mills, City of Somerville







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Engineering





Table 1A

## Summary of Monitoring Events: June 1, 2007 through June 30, 2007

Capuano Center  
Somerville, Massachusetts

Monitoring Date	Monitoring Event per RMR Report Period	Type of Monitoring Event	SSDS Field Parameters Measured	Analytical Samples Collected (yes/no)?
6/1/2007	1	SSDS Weekly Mechanical Inspection	-Pressure and VOC concentrations at each manifold pipe, the combined influent and effluent pipes -System Flow Rate	No
6/8/2007	2	SSDS Weekly Mechanical Inspection	-Pressure and VOC concentrations at each manifold pipe, the combined influent and effluent pipes -System Flow Rate	No
6/15/2007	3	SSDS Weekly Mechanical Inspection	-Pressure and VOC concentrations at each manifold pipe, the combined influent and effluent pipes -System Flow Rate	No
6/22/2007	4	SSDS Weekly Mechanical Inspection	-Pressure and VOC concentrations at each manifold pipe, the combined influent and effluent pipes -System Flow Rate	No

Notes:

1. RMR = Remedial Monitoring Report.
2. SSDS = Sub-Slab Depressurization System.
3. VOCs = Volatile Organic Compounds.
4. HVAC = Heating, Ventilation, and Air Conditioning system.
5. VOC measurements collected with a ppb-RAE calibrated to 10 parts per million (ppm) isobutylene.
6. Pressure readings collected using a Dwyer 475-000-FM manometer.





**Table 1B**

**Summary of Monitoring Events: June 1, 2007 through June 30, 2007**  
**SSDSs at Residences**  
**Somerville, Massachusetts**

Monitoring Date	Monitoring Event per RMR Report Period	Type of Monitoring Event	SSDS Field Parameters Measured	Analytical Samples Collected (yes/no)?
6/5/2007	1	Confirmatory Air Sampling at 95R Franklin Street	-Ambient air VOC concentrations	Yes
6/7/2007	2	Confirmatory Air Sampling at 95 Franklin Street	-Ambient Air VOC concentrations	Yes
6/12/2007	3	SSDS Installation at 31-33 Knowlton Street	-Vacuum distribution beneath the floor slab	No

**Notes:**

1. RMR = Remedial Monitoring Report.
2. SSDS = Sub-Slab Depressurization System.
3. VOCs = Volatile Organic Compounds.
4. HVAC = Heating, Ventilation, and Air Conditioning system.
5. VOC measurements collected with a ppb-RAE calibrated to 10 parts per million (ppm) isobutylene.
6. Pressure readings collected using a Dwyer 475-000-FM manometer.



Table 2  
Summary of Testing Results - Indoor Air Sampling  
SSDSs at Residences  
Somerville, Massachusetts

Sample Address: Sample Name: Sample Date: Sample Location:		23 Tufts Street		95R Franklin Street		95 Franklin Street	
		045162-23TUFTS-B 5/26/07 Basement	045162-23TUFTS-1 5/26/07 First Floor	045162-95RFRANK- 6/5/07 Crawl Space	045162-95RFRANK- 6/5/07 First Floor	045162-95FRAN-B1 6/7/07 Basement	045162-95FRAN-1 6/7/07 First Floor
		µg/m <sup>3</sup> ppbv	ug/m <sup>3</sup> ppbv	µg/m <sup>3</sup> ppbv	µg/m <sup>3</sup> ppbv	µg/m <sup>3</sup> ppbv	µg/m <sup>3</sup> ppbv
Analyte	Units: Method						
Volatile Organic Compounds (VOCs)	TO-15						
Carbon tetrachloride		< 1.3	< 1.3	< 6.3	0.88 J	0.69 J	0.63 J
Tetrachloroethylene (PCE)		< 1.4	< 1.4	8.2	19	8.1	8.8
1,1,1-Trichloroethane		1.1 J	0.51 J	< 5.5	< 1.1	< 1.1	< 1.1
Trichloroethylene (TCE)		< 1.1	< 1.1	< 5.4	0.75 J	< 1.1	< 1.1
		< 0.20	< 0.20	< 1.0	0.14 J	0.11 J	0.10 J
		< 0.20	< 0.20	1.2	2.8	1.2	1.3
		0.099 J	0.093 J	< 1.0	< 0.20	< 0.20	< 0.20
		< 0.20	< 0.20	< 1.0	0.14 J	< 0.20	< 0.20

General Notes

- Analytes detected in at least one sample are reported here. For a complete list of analytes see the laboratory data sheets.
- µg/m<sup>3</sup> = micrograms per cubic meter.
- ppbv = parts per billion by volume.
- "<" = The analyte was not detected at a concentration above the specified laboratory reporting limit.

Qualifying Notes

- The reported result is below the laboratory reporting limit and is estimated.





Table 3  
Summary of Testing Results - Effluent Discharge Estimates  
SSDs at Residences  
Somerville, Massachusetts

Sample Location: Sample Name: Sample Date: Matrix: Units: Method		23 Tufts		31/33 Knowlton		95 Franklin	
		045160-23Tufts-B		31-KNOW-SS2		95-FRANK-SS2	
		6/28/06		3/5/07		4/19/07	
		Indoor Air		Sub-Slab		Sub-Slab	
Analyte		µg/m <sup>3</sup>	ppbv	µg/m <sup>3</sup>	ppbv	µg/m <sup>3</sup>	ppbv
Volatile Organic Compounds (VOCs)							
Carbon tetrachloride	TO-15	< 1.3	< 0.20	< 1.3	< 0.20	0.63 J	0.10 J
1,1-Dichloroethane		< 0.81	< 0.20	< 0.81	< 0.20	133	32.9
1,1-Dichloroethylene		< 0.79	< 0.20	< 0.79	< 0.20	90.8	22.9
1,2-Dichloroethane		1.9	0.91	< 0.81	< 0.20	< 0.81	< 0.20
cis,1,2-Dichloroethene		< 0.79	< 0.20	< 0.79	< 0.20	161	40.6
trans,1,2-Dichloroethene		< 0.79	< 0.20	< 0.79	< 0.20	4.4	1.1
Tetrachloroethylene (PCE)		125	18.5	2.6	0.39	15500	2290
1,1,1-Trichloroethane		1.5	0.28	< 1.1	< 0.20	234	42.9
Trichloroethylene (TCE)		1.0 J	0.19 J	< 1.1	< 0.20	447	83.1
Vinyl Chloride		< 0.51	< 0.20	< 0.51	< 0.20	1.3	0.5
Total VOCs		128	19.7	2.6	0.4	16600	2510

#### General Notes

1. Analytes detected in at least one sample are reported here. For a complete list of analytes see the laboratory data sheets.
2. µg/m<sup>3</sup> = micrograms per cubic meter.
3. ppbv = parts per billion by volume.
4. "<" = The analyte was not detected at a concentration above the specified laboratory reporting limit.
5. NT= The sample was not tested for this analyte.

#### Qualifying Notes

- J The reported result is below the laboratory reporting limit and is estimated.



**Table 4**  
**Summary of Estimated SSDS Discharge Rates**  
**50 Tufts Street**  
**Somerville, Massachusetts**

VARIABLE	UNITS	CAPUANO CENTER <sup>1</sup>	31-33 KNOWLTON STREET <sup>2</sup>	23 TUFTS STREET <sup>2</sup>	95 FRANKLIN STREET <sup>2</sup>
Total Chlorinated VOC Effluent Concentration	µg/m <sup>3</sup>	1,725	2.6	128	16,600
	kg/m <sup>3</sup>	1.73E-06	2.60E-09	1.28E-07	1.66E-05
	lbs/m <sup>3</sup>	3.80E-06	5.72E-09	2.82E-07	3.65E-05
	lbs/cf	1.08E-07	1.62E-10	8.00E-09	1.03E-06
Effluent Flow Rate	cfm	108	50	95	95
Estimated Mass Discharge	lbs/minute	1.16E-05	8.10E-09	7.60E-07	9.83E-05
	lbs/day	1.67E-02	1.17E-05	1.09E-03	1.42E-01
	lbs/year	6.1	0.004	0.4	52

- Notes:**
1. Total chlorinated volatile organic compounds (VOCs) calculated from February 8, 2007 effluent air sample.
  2. Total chlorinated VOCs calculated from sub-slab soil or indoor air testing results.
  3. Effluent flow rate derived from differential pressure readings of the exhaust stack pipe.
  4. µg/m<sup>3</sup> = micrograms per cubic meter.
  5. kg/m<sup>3</sup> = kilograms per cubic meter.
  6. lbs/m<sup>3</sup> = pounds per cubic meter.
  7. cfm = cubic feet per minute.
  8. Conversion factors used: 1 µg = 1 x 10<sup>-9</sup> kg, 1 kg = 2.2 lbs, 1 m = 3.28 ft, 1 m<sup>3</sup> = 35.3 cf







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0 1000 2000 4000 6000  
SCALE, FEET



This Image provided by MassGIS is taken from  
U.S.G.S. Topographic 7.5 X 15 Minute Series  
Boston North, MA Quadrangle, 1985.  
Datum is National Geodetic Vertical Datum (NGVD).  
Contour Interval is 3 Meters.

Remedial Monitoring Report No. 3  
50 Tufts Street  
Somerville, Massachusetts

UniFirst Corporation  
Wilmington, Massachusetts



SITE LOCATION MAP

Project 04516-2

August 2007

Fig. 1



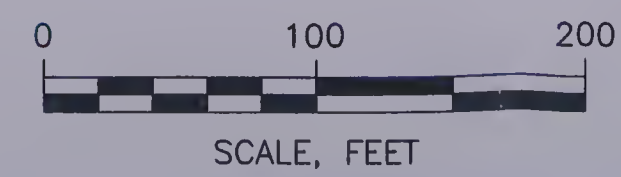







**LEGEND:**  
RESIDENCES AND BUILDINGS TO BE EVALUATED

- GENERAL NOTES:**
- 1. BUILDINGS, STREET, AND PROPERTY LINES BASED ON SOMERVILLE ASSESSORS MAPS AND ARE BEST FIT RELATIVE TO THE LOCATION OF THE 50 TUFTS ST. BUILDING.
  - 2. CAPUANO CENTER BUILDING IS BASED ON DRAWING A0.2 FROM THE ARCHITECTURAL BID SET OF "THE EDGERTY EARLY CHILDHOOD DEVELOPMENT CENTER" BY HMFH ARCHITECTS, INC., DATED AUGUST 10, 2001.



Remedial Monitoring Report No. 3 50 Tufts Street Somerville, Massachusetts UniFirst Corporation Wilmington, Massachusetts	 <b>GEI</b> Consultants	50 TUFTS STREET SITE	
		Project 04516-2	August 2007
		Fig. 2	





# GENERAL NOTES:

1. BUILDINGS, STREET, AND PROPERTY LINES BASED ON SOMERVILLE ASSESSORS MAPS.
2. CAPUANO CENTER BUILDING IS BASED ON DRAWING A0.2 FROM THE ARCHITECTURAL BID SET OF "THE EDGERTY EARLY CHILDHOOD DEVELOPMENT CENTER" BY HMFH ARCHITECTS, INC., DATED AUGUST 10, 2001.



## MICHAEL E. CAPUANO EARLY CHILDHOOD CENTER



0 40 80  
APPROXIMATE SCALE, FEET

Remedial Monitoring Report No. 3  
50 Tufts Street  
Somerville, Massachusetts  
UniFirst Corporation  
Wilmington, Massachusetts



Project 04516-2

CAPUANO CENTER  
SITE PLAN

August 2007

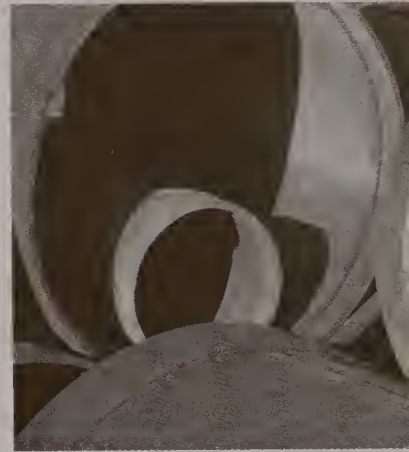
Fig. 3







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Water Resources  
Engineering







**ATTACHMENT A**  
BWSC105 and Interim RMR Checklist





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC105

**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM** Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3

-

26114

**A. RELEASE OR THREAT OF RELEASE LOCATION:**

1. Release Name/Location Aid: \_\_\_\_\_

2. Street Address: 50 Tufts Street

3. City/Town: Somerville

4. ZIP Code: 02149

5. UTM Coordinates: a. UTM N: 4694322 b. UTM E: 328049

☐ 6. Check here if a Tier Classification Submittal has been provided to DEP for this disposal site.

☐ a. Tier IA ☐ b. Tier IB ☐ c. Tier IC ☐ d. Tier II

☐ 7. Check here if this location is Adequately Regulated, pursuant to 310 CMR 40.0110-0114. Specify Program (check one):

☐ a. CERCLA ☐ b. HSWA Corrective Action ☐ c. Solid Waste Management

☐ d. RCRA State Program (21C Facilities)

**B. THIS FORM IS BEING USED TO:** (check all that apply)

1. List Submittal Date of Initial IRA Written Plan (if previously submitted): 11/13/2006

(mm/dd/yyyy)

☐ 2. Submit an **Initial IRA Plan**.

☐ 3. Submit a **Modified IRA Plan** of a previously submitted written IRA Plan.

☐ 4. Submit an **Imminent Hazard Evaluation**. (check one)

☐ a. An Imminent Hazard exists in connection with this Release or Threat of Release.

☐ b. An Imminent Hazard does not exist in connection with this Release or Threat of Release.

☐ c. It is unknown whether an Imminent Hazard exists in connection with this Release or Threat of Release, and further assessment activities will be undertaken.

☐ d. It is unknown whether an Imminent Hazard exists in connection with this Release or Threat of Release. However, response actions will address those conditions that could pose an Imminent Hazard.

☐ 5. Submit a request to **Terminate an Active Remedial System or Response Action(s) Taken to Address an Imminent Hazard**.

☐ 6. Submit an **IRA Status Report**.

☒ 7. Submit a **Remedial Monitoring Report**. (This report can only be submitted through eDEP.)

a. Type of Report: (check one) ☐ i. Initial Report ☒ ii. Interim Report ☐ iii. Final Report

b. Frequency of Submittal: (check all that apply)

☒ i. A Remedial Monitoring Report(s) submitted monthly to address an Imminent Hazard.

☒ ii. A Remedial Monitoring Report(s) submitted monthly to address a Condition of Substantial Release Migration.

☐ iii. A Remedial Monitoring Report(s) submitted concurrent with a IRA Status Report.

c. Number of Remedial Systems and/or Monitoring Programs: 5

A separate BWSC105A, IRA Remedial Monitoring Report, must be filled out for each Remedial System and/or Monitoring Program addressed by this transmittal form.







**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM** Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3 - 26114

**B. THIS FORM IS BEING USED TO (cont.):** (check all that apply)

☐ 8. Submit an **IRA Completion Statement**.

☐ a. Check here if future response actions addressing this Release or Threat of Release notification condition will be conducted as part of the Response Actions planned or ongoing at a Site that has already been Tier Classified under a different Release Tracking Number (RTN) . When linking RTNs, rescoring via the NRS is required if there is a reasonable likelihood that the addition of the new RTN(s) would change the classification of the site.

b. Provide Release Tracking Number of Tier Classified Site (Primary RTN):

☐ - ☐

These additional response actions must occur according to the deadlines applicable to the Primary RTN. Use the Primary RTN when making all future submittals for the site unless specifically relating to this Immediate Response Action.

☐ 9. Submit a **Revised IRA Completion Statement**.

(All sections of this transmittal form must be filled out unless otherwise noted above)

**C. RELEASE OR THREAT OF RELEASE CONDITIONS THAT WARRANT IRA:**

1. Identify Media Impacted and Receptors Affected: (check all that apply)

- ☒ a. Air ☒ b. Basement ☒ c. Critical Exposure Pathway ☒ d. Groundwater ☒ e. Residence  
☐ f. Paved Surface ☐ g. Private Well ☐ h. Public Water Supply ☒ i. School ☐ j. Sediments  
☐ k. Soil ☐ l. Storm Drain ☐ m. Surface Water ☐ n. Unknown ☐ o. Wetland ☐ p. Zone 2  
☐ q. Others Specify: \_\_\_\_\_

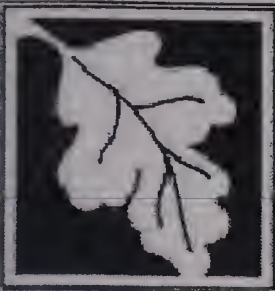
2. Identify Oils and Hazardous Materials Released: (check all that apply)

- ☐ a. Oils ☒ b. Chlorinated Solvents ☐ c. Heavy Metals  
☐ d. Others Specify: \_\_\_\_\_

**D. DESCRIPTION OF RESPONSE ACTIONS:** (check all that apply, for volumes list cumulative amounts)

- |  |   |
|--|---|
| <input type="checkbox"/> 1. Assessment and/or Monitoring Only                | <input type="checkbox"/> 2. Temporary Covers or Caps                        |
| <input type="checkbox"/> 3. Deployment of Absorbent or Containment Materials | <input type="checkbox"/> 4. Temporary Water Supplies                        |
| <input checked="" type="checkbox"/> 5. Structure Venting System              | <input type="checkbox"/> 6. Temporary Evacuation or Relocation of Residents |
| <input type="checkbox"/> 7. Product or NAPL Recovery                         | <input type="checkbox"/> 8. Fencing and Sign Posting                        |
| <input type="checkbox"/> 9. Groundwater Treatment Systems                    | <input type="checkbox"/> 10. Soil Vapor Extraction                          |
| <input type="checkbox"/> 11. Bioremediation                                  | <input type="checkbox"/> 12. Air Sparging                                   |





Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC105

**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM** Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3 - 26114

**D. DESCRIPTION OF RESPONSE ACTIONS (cont.):** (check all that apply, for volumes list cumulative amounts)

☐ 13. Excavation of Contaminated Soils

☐ a. Re-use, Recycling or Treatment

☐ i. On Site Estimated volume in cubic yards \_\_\_\_\_

☐ ii. Off Site Estimated volume in cubic yards \_\_\_\_\_

ii.a. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

ii.b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

iii. Describe: \_\_\_\_\_

☐ b. Store

☐ i. On Site Estimated volume in cubic yards \_\_\_\_\_

☐ ii. Off Site Estimated volume in cubic yards \_\_\_\_\_

ii.a. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

ii.b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ c. Landfill

☐ i. Cover Estimated volume in cubic yards \_\_\_\_\_

Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ ii. Disposal Estimated volume in cubic yards \_\_\_\_\_

Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ 14. Removal of Drums, Tanks or Containers:

a. Describe Quantity and Amount: \_\_\_\_\_

b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

c. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☐ 15. Removal of Other Contaminated Media:

a. Specify Type and Volume: \_\_\_\_\_

b. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

c. Receiving Facility: \_\_\_\_\_ Town: \_\_\_\_\_ State: \_\_\_\_\_

☒ 16. Other Response Actions:

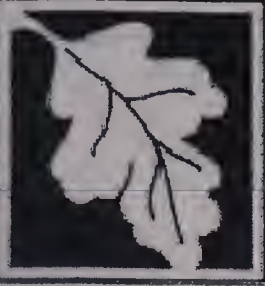
Describe: Temporary air purifiers and/or sub-slab depressurization systems

☐ 17. Use of Innovative Technologies:

Describe: \_\_\_\_\_







**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM**

Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3

-

26114

**E. LSP SIGNATURE AND STAMP:**

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and 309 CMR 4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

> if Section B of this form indicates that an **Immediate Response Action Plan** is being submitted, the response action(s) that is(are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is(are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that an **Imminent Hazard Evaluation** is being submitted, this Imminent Hazard Evaluation was developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and the assessment activity(ies) undertaken to support this Imminent Hazard Evaluation comply(ies) with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000;

> if Section B of this form indicates that an **Immediate Response Action Status Report** and/or a **Remedial Monitoring Report** is(are) being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that an **Immediate Response Action Completion Statement** or a request to **Terminate an Active Remedial System or Response Action(s) Taken to Address an Imminent Hazard** is being submitted, the response action(s) that is(are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is(are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

1. LSP #: 9719

2. First Name: Ileen S.

3. Last Name: Gladstone

4. Telephone: (781) 721-4012

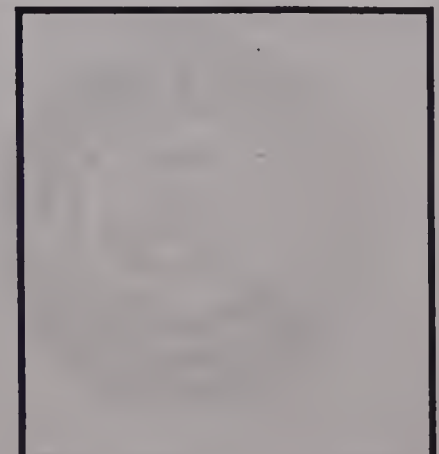
5. Ext.:

6. FAX: (781) 721-4073

7. Signature:

8. Date: (mm/dd/yyyy)

9. LSP Stamp:









Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC105

**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM** Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3 - 26114

**E. LSP SIGNATURE AND STAMP:**

I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and 309 CMR 4.03(2), and (iii) the provisions of 309 CMR 4.03(3), to the best of my knowledge, information and belief,

> if Section B of this form indicates that an **Immediate Response Action Plan** is being submitted, the response action(s) that is(are) the subject of this submittal (i) has (have) been developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is(are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that an **Imminent Hazard Evaluation** is being submitted, this Imminent Hazard Evaluation was developed in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and the assessment activity(ies) undertaken to support this Imminent Hazard Evaluation comply(ies) with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000;

> if Section B of this form indicates that an **Immediate Response Action Status Report** and/or a **Remedial Monitoring Report** is(are) being submitted, the response action(s) that is (are) the subject of this submittal (i) is (are) being implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal;

> if Section B of this form indicates that an **Immediate Response Action Completion Statement** or a request to **Terminate an Active Remedial System or Response Action(s) Taken to Address an Imminent Hazard** is being submitted, the response action(s) that is(are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is(are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000 and (iii) comply(ies) with the identified provisions of all orders, permits, and approvals identified in this submittal.

I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.

1. LSP #: 9719

2. First Name: Ileen S.

3. Last Name: Gladstone

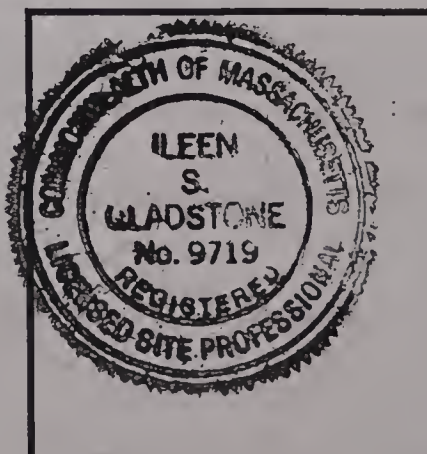
4. Telephone: (781) 721-4012

5. Ext.: 6. FAX: (781) 721-4073

7. Signature:

8. Date: 8/30/07  
(mm/dd/yyyy)

9. LSP Stamp:









Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC105

**IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM** Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3 - 26114

**F. PERSON UNDERTAKING IRA:**

1. Check all that apply: ☒ a. change in contact name ☐ b. change of address ☐ c. change in the person undertaking response actions
2. Name of Organization: UniFirst Corp.
3. Contact First Name: Stephen 4. Last Name: Aquilino
5. Street: 68 Jonspin Road 6. Title: Property Management
7. City/Town: Wilmington 8. State: MA 9. ZIP Code: 01887
10. Telephone: (800) 347-7880 11. Ext.: \_\_\_\_\_ 12. FAX: \_\_\_\_\_

**G. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PERSON UNDERTAKING IRA:**

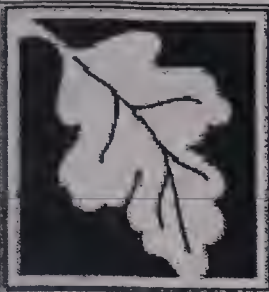
- ☒ 1. RP or PRP ☐ a. Owner ☐ b. Operator ☐ c. Generator ☐ d. Transporter
- ☒ e. Other RP or PRP Specify: Other PRPs
- ☐ 2. Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)
- ☐ 3. Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))
- ☐ 4. Any Other Person Undertaking IRA Specify Relationship: \_\_\_\_\_

**H. REQUIRED ATTACHMENT AND SUBMITTALS:**

- ☐ 1. Check here if any Remediation Waste, generated as a result of this IRA, will be stored, treated, managed, recycled or reused at the site following submission of the IRA Completion Statement. If this box is checked, you must submit one of the following plans, along with the appropriate transmittal form.
- ☐ a. A Release Abatement Measure (RAM) Plan (BWSC106) ☐ b. Phase IV Remedy Implementation Plan (BWSC108)
- ☐ 2. Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.
- ☒ 3. Check here to certify that the Chief Municipal Officer and the Local Board of Health were notified of the implementation of an Immediate Response Action taken to control, prevent, abate or eliminate an Imminent Hazard.
- ☐ 4. Check here to certify that the Chief Municipal Officer and the Local Board of Health were notified of the submittal of a Completion Statement for an Immediate Response Action taken to control, prevent, abate or eliminate an Imminent Hazard.
- ☐ 5. Check here if any non-updatable information provided on this form is incorrect, e.g. Release Address/Location Aid. Send corrections to the DEP Regional Office.
- ☒ 6. Check here to certify that the LSP Opinion containing the material facts, data, and other information is attached.







Massachusetts Department of Environmental Protection  
Bureau of Waste Site Cleanup

BWSC105

IMMEDIATE RESPONSE ACTION (IRA) TRANSMITTAL  
FORM

Pursuant to 310 CMR 40.0424 - 40.0427 (Subpart D)

Release Tracking Number

3

-

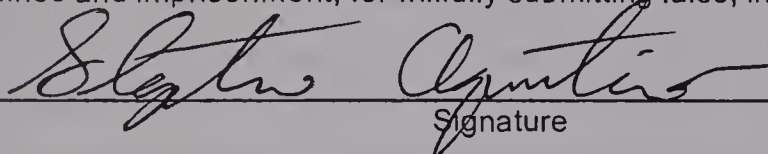
26114

I. CERTIFICATION OF PERSON UNDERTAKING IRA:

Stephen Aquilino

1. I, \_\_\_\_\_, attest under the pains and penalties of perjury (i) that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this transmittal form, (ii) that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained in this submittal is, to the best of my knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized to make this attestation on behalf of the entity legally responsible for this submittal. I/the person or entity on whose behalf this submittal is made am/is aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete information.

2. By:

  
Signature

3. Title: Property Management

4. For:

Stephen Aquilino

5. Date:

8-31-07

(Name of person or entity recorded in Section F)

(mm/dd/yyyy)



6. Check here if the address of the person providing certification is different from address recorded in Section F.

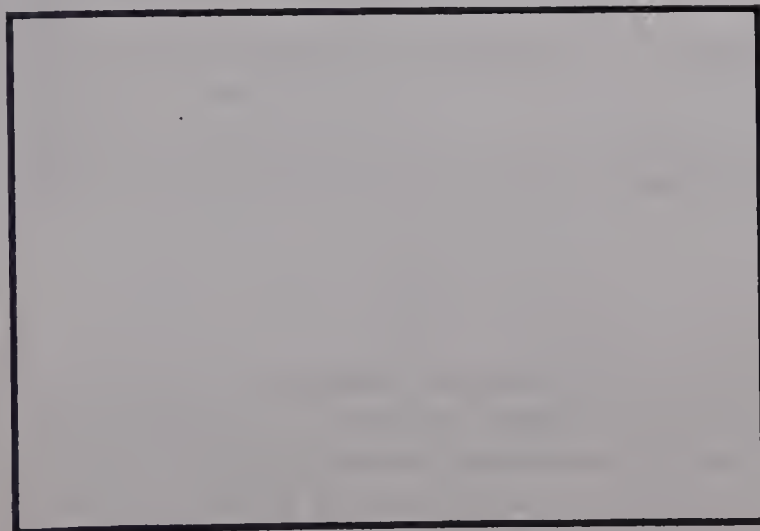
7. Street: \_\_\_\_\_

8. City/Town: \_\_\_\_\_ 9. State: \_\_\_\_\_ 10. ZIP Code: \_\_\_\_\_

11. Telephone: \_\_\_\_\_ 12. Ext.: \_\_\_\_\_ 13. FAX: \_\_\_\_\_

YOU ARE SUBJECT TO AN ANNUAL COMPLIANCE ASSURANCE FEE OF UP TO \$10,000 PER BILLABLE YEAR FOR THIS DISPOSAL SITE. YOU MUST LEGIBLY COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE.

Date Stamp (DEP USE ONLY:)







# Massachusetts Department of Environmental Protection

Bureau of Waste Site Cleanup

## Interim Remedial Monitoring Report (RMR) Checklist

Pursuant to 310 CMR 40.0027

Release Tracking Number

3 - 26114

### Site Location:

Site Name:

Street Address: 50 Tufts Street

City/Town: Somerville

ZIP Code: 02145

### Pursuant to 310 CMR 40.0027, the following information is required as part of a Remedial Monitoring Report:

- ☒ Number and Description of Active Remedial System(s) or Active Remedial Monitoring Program(s) – include type of system, remedial additives applied, mode of operation, and where the system effluent discharges
- ☒ Monitoring Frequency – include date(s) and number of monitoring events for reporting period
- ☒ Operating Status of Active Remedial Systems – include information regarding any system shutdown during the reporting period and the date/duration of shutdown
- ☒ Effluent Concentrations – provide data for all monitoring events, include information regarding any discharges above permissible discharge concentrations
- ☒ Recovery Rates and/or Volumes
- ☒ Discharge Volumes
- ☒ Date, Location, Type, and Volume of Remedial Additive Applications
- ☒ Groundwater Data – sampling results, monitoring data, etc.
- ☒ Related Maps, Graphs or Diagrams
- ☒ Other Supporting Documentation – narrative, laboratory data, etc.

### Summary Statements: (check all that apply for the current reporting period)

The response actions are being conducted as part of a(n):

☒ IRA ☐ RAM ☐ URAM ☐ Phase V ☐ ROS ☐ Class C RAO

Submittal Frequency:

☒ Monthly (IH/SRM) ☐ Concurrent with Status Reports

- ☒ All Active Remedial System checks and effluent analyses required by the approved plan and/or permit were performed when applicable.
- ☒ There were no significant problems or prolonged (>25% of reporting period) unscheduled shutdowns of the Active Remedial System.
- ☒ The Active Remedial System or Active Remedial Monitoring Program operated in conformance with the MCP, and all applicable approval conditions and/or permits.

**Note to users:** This Interim Remedial Monitoring Report (RMR) Checklist is for hardcopy submittals only. This form may be used through April 3, 2007. On or after this date, all Remedial Monitoring Reports must be submitted to the Department electronically pursuant to 310 CMR 40.0027(6). The Remedial Monitoring Report is currently available through eDEP as part of the electronic online submittal of the BWSC105 Immediate Response Action (IRA) Transmittal Form, BWSC106 Release Abatement Measure (RAM) Transmittal Form, BWSC108 Comprehensive Response Action Transmittal Form, and BWSC119 Utility-Related Abatement Measure (URAM) Transmittal Form.







Geotechnical  
Environmental and  
Water Resources  
Engineering







**ATTACHMENT B**

Weekly Mechanical Inspection Log for Capuano Center



## Weekly Mechanical Inspection Log for Capuano Center

## GENERAL INFORMATION

GEI Field Representatives: S. Slater

Date: 06/08/07

Weather: Sunny

Start-time of monitoring work: 11:15:00

End-time of monitoring work: 11:50:00

System Status: ON

## INSTRUMENTATION INFORMATION

<b>Instrument</b>	PID (ppb)	Manometer (in H <sub>2</sub> O)
<b>Manufacturer</b>	Pro-Rae Systems	Dwyer
<b>Model</b>	ppb-RAE	Mark III-475-0000 Series
<b>GEI Identification No.</b>	PINE	NA
<b>Calibrant</b>	10 ppm Isobutylene	NA
<b>Successful Calibration</b>	Yes	Zeroed before each reading

## FIELD MEASUREMENTS

Shed Secure? YES

## Discharge Pressure Port

Condensate Accumulated? NO

Condensate Drained?	NA
---------------------	----

Insert Increment	Pressure (in. H2O)
0.25"	0.102
0.5"	0.105
1.0"	0.105
2.0"	0.108

Average Pressure (in. H<sub>2</sub>O)

Average Flow Rate (cfm)

## Shed Pressure/VOC Measurements

Port ID	Typical Pressure Range	Pressure	Typical Range of VOCs	VOC (ppb)
Manifold 12	-0.300 to -0.500	-0.321	0 to 2000	95
Manifold 13	-0.300 to -0.500	-0.370	0 to 5000	103
Manifold 14	-0.300 to -0.500	-0.335	0 to 2000	125
Combined Influent	-0.600 to -0.700	-0.639	0 to 2000	35
Effluent	0.480 to 0.600	0.595	0 to 2000	0

## Comments

Effluent spiked to 47 ppb once, but was otherwise 0 ppb.

**Notes:**

1. Manifold 12 is the manifold pipe for rooms 122 and 126. Manifold 13 is the manifold pipe for rooms 134 and 138. Manifold 14 is the manifold pipe for rooms 142 and 146.





Weekly Mechanical Inspection Log for Capuano Center

GENERAL INFORMATION		
GEI Field Representatives:	T. Daigle H. Ballantyne	Start-time of monitoring work: 10:30
Date:	06/15/07	End-time of monitoring work: 11:15
Weather:	sunny, 70's	System Status: ON

INSTRUMENTATION INFORMATION		
Instrument	PID (ppb)	Manometer (in H <sub>2</sub> O)
Manufacturer	Pro-Rae Systems	Dwyer
Model	ppb-RAE	Mark III-475-0000 Series
GEI Identification No.	PINE	NA
Calibrant	10 ppm Isobutylene	NA
Successful Calibration	Yes	Zeroed before each reading

FIELD MEASUREMENTS														
Shed Secure?	<u>YES</u>	Discharge Pressure Port												
Condensate Accumulated?	<u>NO</u>	<table><tr><th>Insert Increment</th><th>Pressure (in. H<sub>2</sub>O)</th></tr><tr><td>0.25"</td><td>0.085</td></tr><tr><td>0.5"</td><td>0.095</td></tr><tr><td>1.0"</td><td>0.111</td></tr><tr><td>2.0"</td><td>0.117</td></tr></table>			Insert Increment	Pressure (in. H <sub>2</sub> O)	0.25"	0.085	0.5"	0.095	1.0"	0.111	2.0"	0.117
Insert Increment	Pressure (in. H <sub>2</sub> O)													
0.25"	0.085													
0.5"	0.095													
1.0"	0.111													
2.0"	0.117													
Condensate Drained?	<u>NA</u>	<table><tr><td>0.102</td><td>Average Pressure (in. H<sub>2</sub>O)</td></tr><tr><td>112</td><td>Average Flow Rate (cfm)</td></tr></table>			0.102	Average Pressure (in. H <sub>2</sub> O)	112	Average Flow Rate (cfm)						
0.102	Average Pressure (in. H <sub>2</sub> O)													
112	Average Flow Rate (cfm)													
Shed Pressure/VOC Measurements														
Port ID	Typical Pressure Range	Pressure	Typcial Range of VOCs	VOC (ppb)										
Manifold 12	-0.300 to -0.500	-0.340	0 to 2000	153										
Manifold 13	-0.300 to -0.500	-0.337	0 to 5000	205										
Manifold 14	-0.300 to -0.500	-0.356	0 to 2000	236										
Combined Influent	-0.600 to -0.700	-0.645	0 to 2000	175										
Effluent	0.480 to 0.600	0.637	0 to 2000	190										

Comments
Collected monthly indoor air

**Notes:**  
1. Manifold 12 is the manifold pipe for rooms 122 and 126. Manifold 13 is the manifold pipe for rooms 134 and 138. Manifold 14 is the manifold pipe for rooms 142 and 146.



## Weekly Mechanical Inspection Log for Capuano Center

## GENERAL INFORMATION

GEI Field Representatives: T. Daigle

Date: 06/22/07

Weather: partly cloudy, ~70°F

Start-time of monitoring work: 13:00

End-time of monitoring work: 13:40

System Status: ON

## INSTRUMENTATION INFORMATION

<b>Instrument</b>	PID (ppb)	Manometer (in H <sub>2</sub> O)
<b>Manufacturer</b>	Pro-Rae Systems	Dwyer
<b>Model</b>	ppb-RAE	Mark III-475-0000 Series
<b>GEI Identification No.</b>	PINE	NA
<b>Calibrant</b>	10 ppm Isobutylene	NA
<b>Successful Calibration</b>	Yes	Zeroed before each reading

## FIELD MEASUREMENTS

Shed Secure? YES

### Discharge Pressure Port

Condensate Accumulated?	NO
-------------------------	----

Condensate Drained?	NA
---------------------	----

Insert Increment	Pressure (in. H <sub>2</sub> O)	
0.25"	0.094	
0.5"	0.106	
1.0"	0.102	
2.0"	0.127	
	0.10725	Average Pressure (in. H <sub>2</sub> O)
	112	Average Flow Rate (cfm)

## Shed Pressure/VOC Measurements

Port ID	Typical Pressure Range	Pressure	Typical Range of VOCs	VOC (ppb)
Manifold 12	-0.300 to -0.500	-0.218	0 to 2000	31
Manifold 13	-0.300 to -0.500	-0.237	0 to 5000	106
Manifold 14	-0.300 to -0.500	-0.224	0 to 2000	154
Combined Influent	-0.600 to -0.700	-0.405	0 to 2000	93
Effluent	0.480 to 0.600	0.662	0 to 2000	83

## Comments

**Notes:**

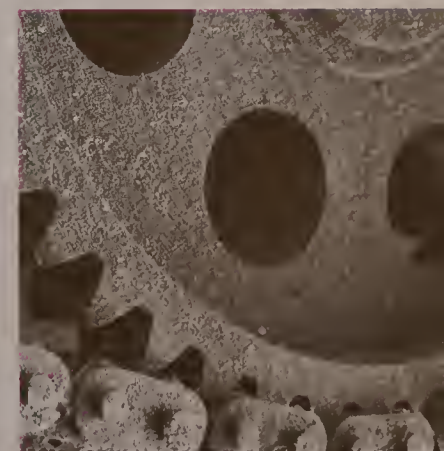
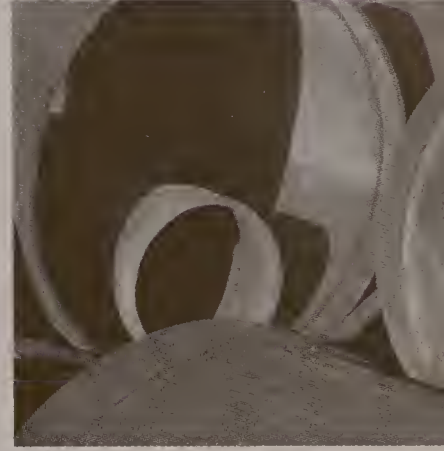
1. Manifold 12 is the manifold pipe for rooms 122 and 126. Manifold 13 is the manifold pipe for rooms 134 and 138. Manifold 14 is the manifold pipe for rooms 142 and 146.







Geotechnical  
Environmental and  
Water Resources  
Engineering





## **ATTACHMENT C**

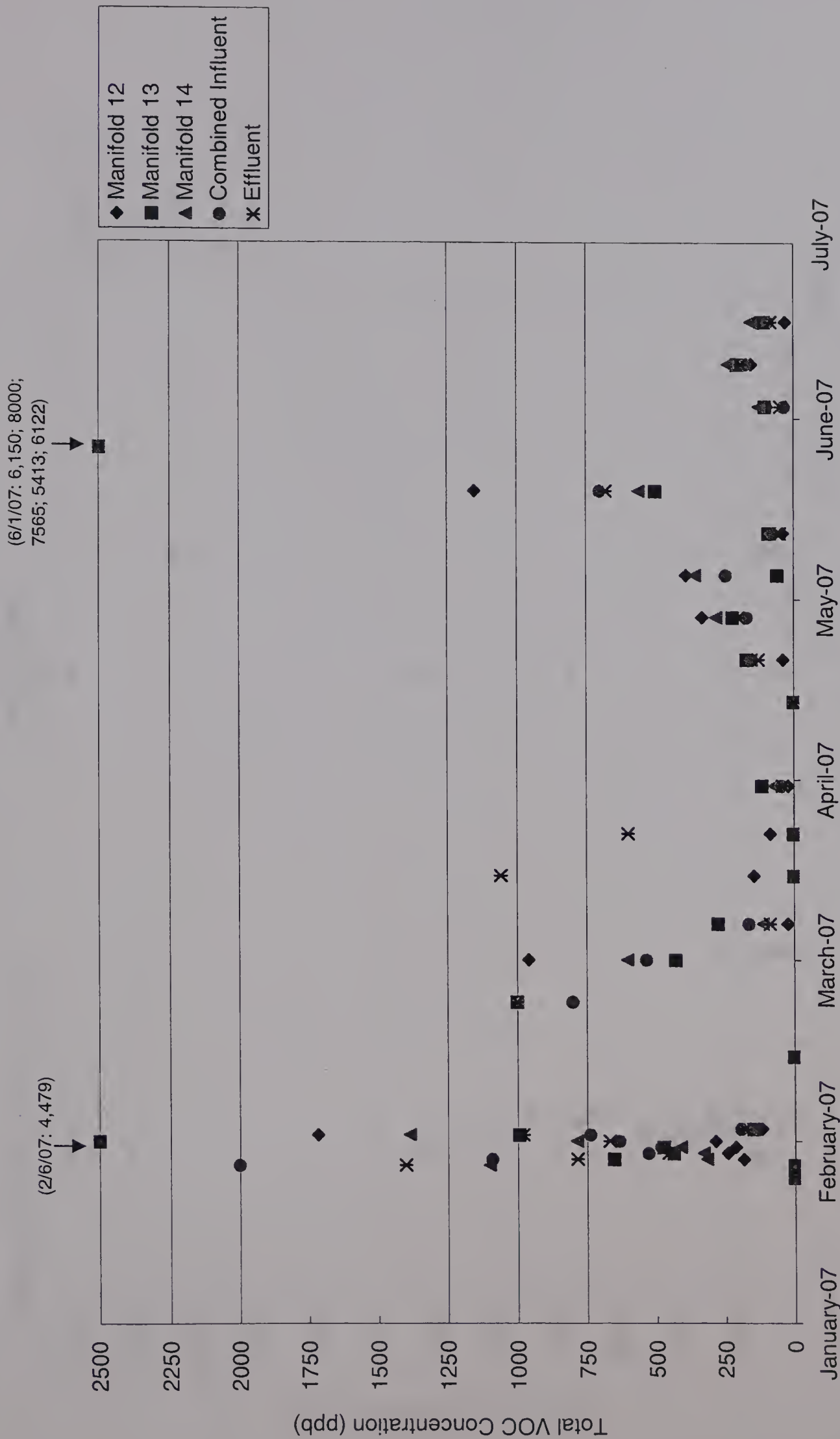
Graphs of SSDS and Sub-Slab Total VOC Concentrations





Graph 1

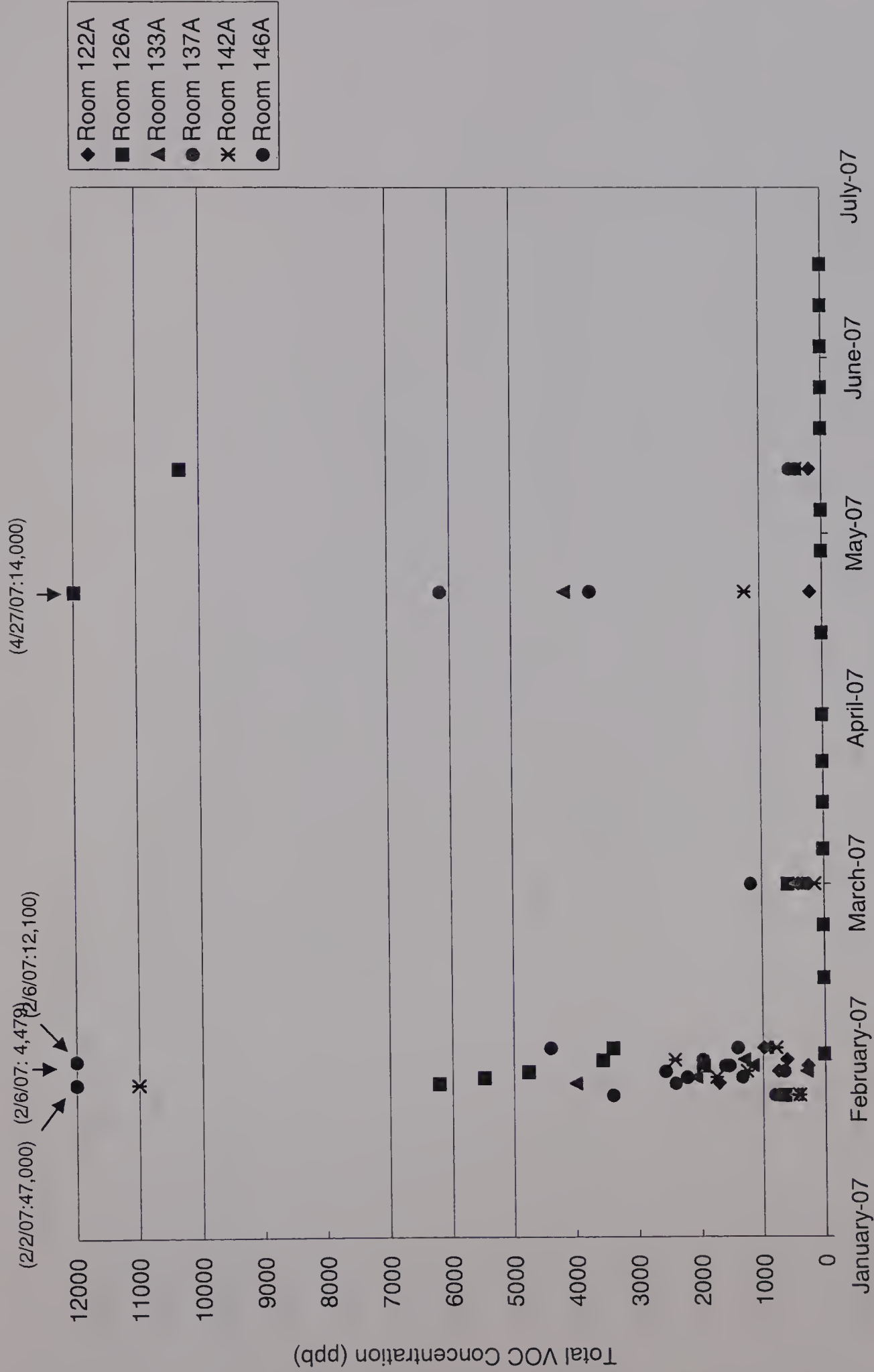
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Blower Enclosure Sub-Slab Monitoring Points  
Capuano Center  
Somerville, MA





Graph 2

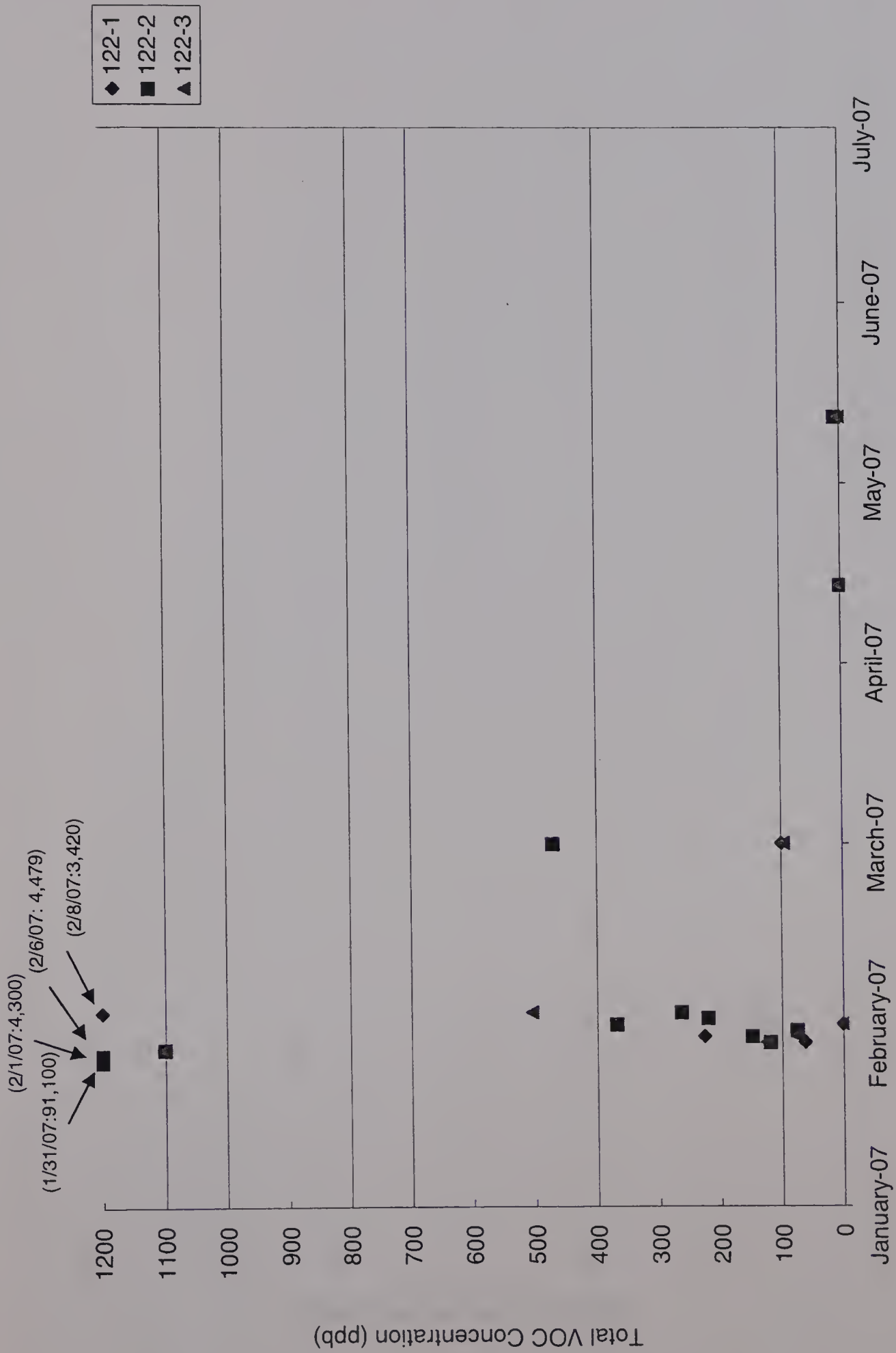
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Interior Sub-Slab Monitoring Points  
Capuano Center  
Somerville, MA







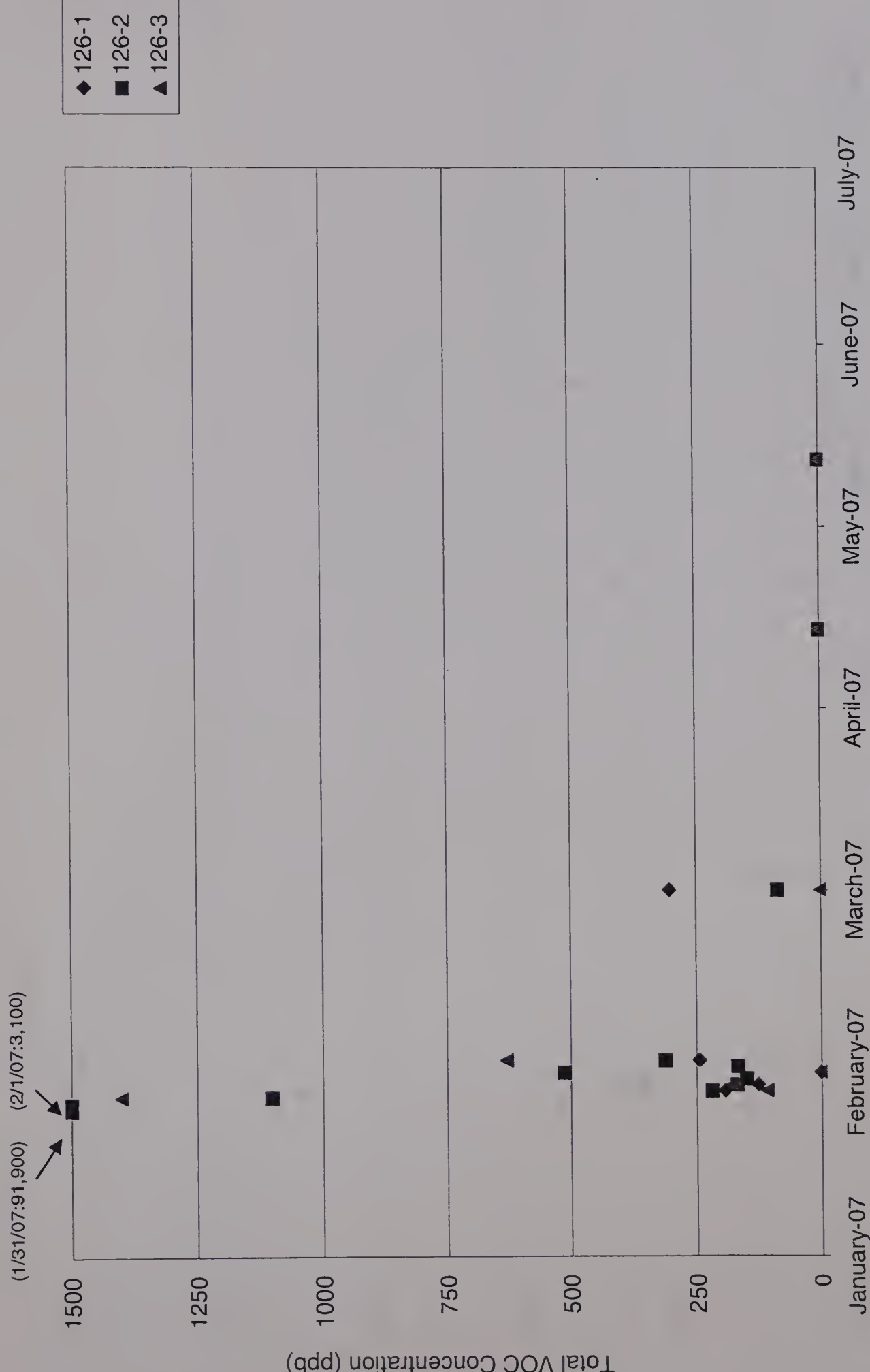
Graph 3  
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Exterior Monitoring Points - Room 122  
Capuano Center  
Somerville, MA





Graph 4

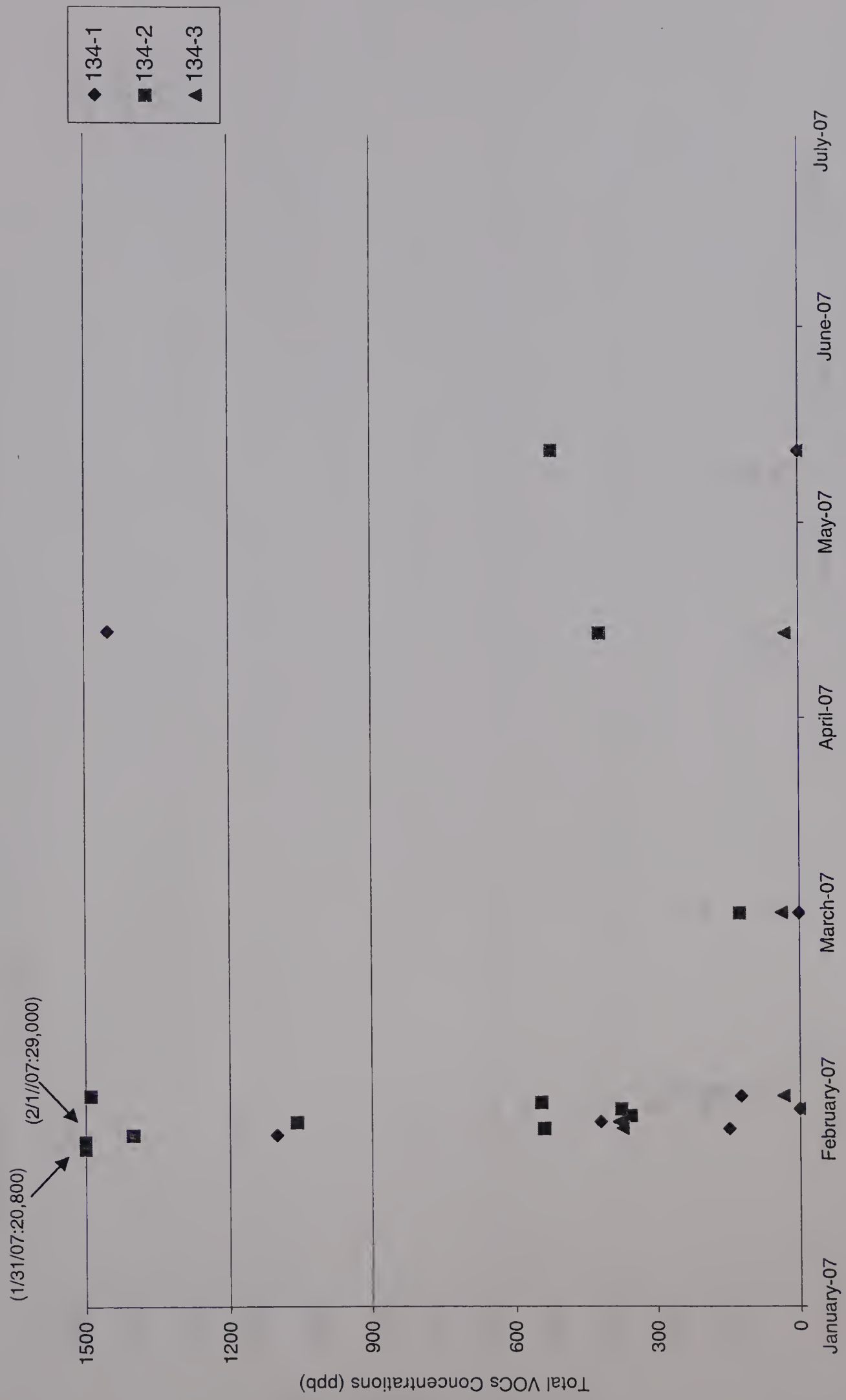
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Exterior Monitoring Points - Room 126  
Capuano Center  
Somerville, MA







Graph 5  
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Exterior Monitoring Points - Room 134  
Capuano Center  
Somerville, MA





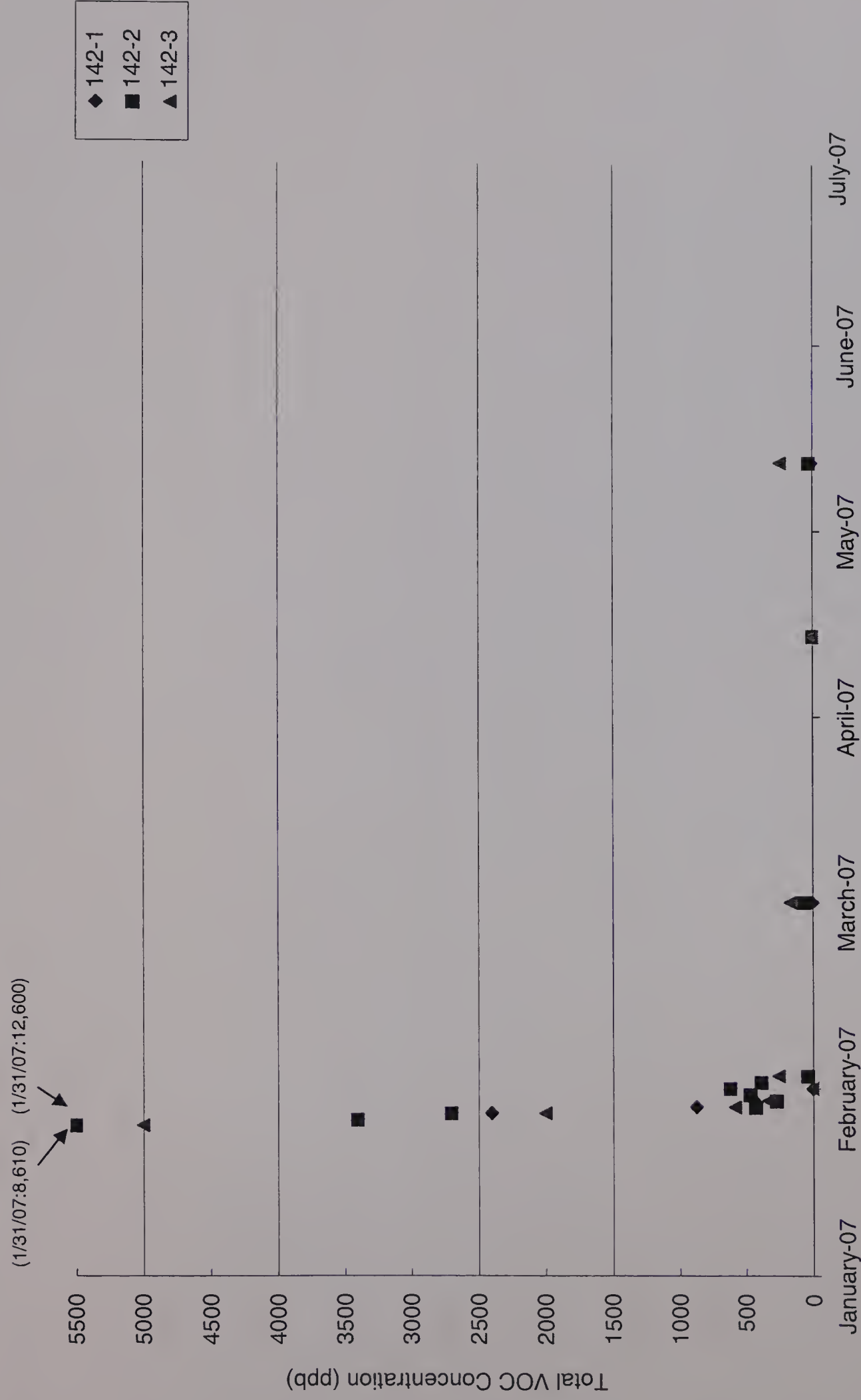
**PID Monitoring Data: January 31, 2007 - June 30, 2007**  
**Total VOC Concentrations by PID at Exterior Monitoring Points - Room 138**  
**Capuano Center**  
**Somerville, MA**







Graph 7  
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Exterior Monitoring Points - Room 142  
Capuano Center  
Somerville, MA





Graph 8  
PID Monitoring Data: January 31, 2007 - June 30, 2007  
Total VOC Concentrations by PID at Exterior Monitoring Points - Room 146  
Capuano Center  
Somerville, MA

